

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Obama for America**

**A. Full Name (Last, First, Middle Initial)**

**Susie Bremen**

Mailing Address 916 Rosebay Dr

City	State	Zip Code
Indianapolis	IN	46240-2382

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metropolitan School District

Occupation  
Coordinator for College Counseling

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

**Transaction ID : C18377055**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	1	2

Amount of Each Receipt this Period

100.00

**B. Full Name (Last, First, Middle Initial)**

**Katherine O'Brien O'Keefe**

Mailing Address 1041 Ventura Ave

City	State	Zip Code
Albany	CA	94706

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of California

Occupation  
Professor

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : C17496895**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	2

Amount of Each Receipt this Period

250.00

**C. Full Name (Last, First, Middle Initial)**

**Patricia Delorme**

Mailing Address 5450 Whitley Park Ter Apt 111

City	State	Zip Code
Bethesda	MD	20814-2057

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-Employed

Occupation  
Clinical Social Worker

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1660.00

**Transaction ID : C18038945**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	2

Amount of Each Receipt this Period

25.00

**Subtotal Of Receipts This Page (optional)**.....

375.00

**Total This Period (last page this line number only)**.....